## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

LNUP'104-US-

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLÁIMS			26					RATE	FEE		RATE	FEE
FOR NUMBER FILED					NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 26 minus 20=					• 6	?		X\$ 9=		OR	X\$18=	108
INDEPENDENT CLAIMS 2 minus 3 =					· Ø			X40=		OR	X80=	d
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL	818
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
		(Column 1) CLAIMS		(Colui		(Column 3)	1 ,	SWALL		UH I I	SIVIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOME	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM			+135=		OR	+270=	
							ı	TOTAL			TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		]=	┨╽	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM	Ш	J	+135=		OR	+270=	
							ı	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	][	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	<b>↓</b> ∤	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b> </b>			UR		
• 16	the entry in colu	mn 1 is less than t	he entry in colu	ımn 2 writ	e "0" in cc	lumn 3.		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												